

MINNESOTA LIBRARY FOUNDATION BOARD OF DIRECTORS APPLICATION

Name:

\_\_\_\_\_  
Last First Middle Initial

Mailing Address:

\_\_\_\_\_  
Street City State Zip

Home or Cell Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_

Employer: \_\_\_\_\_

Why are you interested in serving on the Minnesota Library Foundation Board?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What do you hope to gain from your volunteer experience?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Describe the skills you possess that would be helpful to the MLF mission and its Board of Directors:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

CHECK AREAS OF INTEREST:  Finance  Program Support  PR/Marketing  Donor Cultivation  
/Fundraising  Social Media  Other: \_\_\_\_\_

Comments: \_\_\_\_\_

**Please consider attaching a copy of your resume.**

I, the undersigned, understand this information will be reviewed by the Board before my consideration for a position on the Board. I also affirm that if selected I will do my best to serve as fully as possible in the duties I assume. Board meetings are currently held quarterly on the second Wednesday of every third month at 9:00 a.m. via Zoom. Consistent meeting attendance is requested. This is a three-year commitment with the option of an additional term.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Mailing Address: 1619 Dayton Ave., #314, St. Paul, MN 55104

Email: MNLibraryFoundation@outlook.com